

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL041023	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____		(X3) DATE SURVEY COMPLETED 05/27/2016
NAME OF PROVIDER OR SUPPLIER ST GALES ESTATES			STREET ADDRESS, CITY, STATE, ZIP CODE 7411 LEE'S CHAPEL ROAD GREENSBORO, NC 27405		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
C 000	Initial Comments Report of a Biennial Survey by Billy S. Bryant conducted on 05/27/2016. Records indicate this facility was first licensed on 10/21/1996. The facility is currently licensed for 60 Beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000			
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: The walls and floors are not being kept clean and in good repair as evidenced by the findings. Findings on 05/27/2016: a. Throughout the facility the doors from the corridor to the resident rooms need repair and touch up, the door frames also need touch painting. b. Floors - Throughout the facility there is wax	C 164	A. Residents rooms throughout the facility: The doors and corridors have been painted and repaired. (See Attachment) Assistant Administrator will monitor on a monthly basis, B. Floors: All wax and dirt build up have been clean from the doors throughout the facility. (Please see attachment). The Assist. Administrator and Administrator will assure all areas are being tracked on the track log monthly.	6/8/16 6/8/16	

Continued

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

8899

P3G121

If continuation sheet 1 of 5

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C 164	Continued From page 1 and dirt build up at the bottom of the door frames. c. There are some cracked VCT floor tiles in the corridors. C d. Kitchen - The door to the exterior hits the threshold preventing it from closing without using excessive effort.	C 164	C. All crack VCT tiles will be replaced in the corridors area. Asst. Administrator will check on a monthly basis. (See Attachment).	7/16/16	
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Findings on 05/27/2016: a. Room A3 - There was a multi-plug adapter in use in the resident room. b. M Hall - The concrete slab smoking porch has an approximately 6" drop off to the surrounding ground level. c. Entrance Hall - The GFCI did not trip when tested with a circuit tester.	C 166	D. The kitchen door have been adjusted to close without using force. The kitchen manager will monitor on a monthly basis. (See Attachment). A. Room A-3-Has power server in residents room. Administrator will check monthly for safety conditions B. Smoking porch for residents will be completed 7/8/16. Gravel will be used to fill the drop area	6/1/16 5/31/16 7/8/16	
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan	C 185	C. GFCI replaced and working. Administrator will ensure it remains operable, by checking monthly.	5/31/16	

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NAME OF PROVIDER OR SUPPLIER ST GALES ESTATES			STREET ADDRESS, CITY, STATE, ZIP CODE 7417 7444 LEE'S CHAPEL ROAD GREENSBORO, NC 27405		
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C 185	<p>Continued From page 2</p> <p>quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on a review of records the facility does not meet the requirement to conduct fire drill rehearsals quarterly on each shift.</p> <p>Finding on 05/27/2016</p> <p>a. According to documentation available, fire drills were not conducted for the 2nd shift in the 1st quarter, any shift in the second quarter, the 1st and 2nd shift in the third quarter and the 3rd shift in the fourth quarter.</p>	C 185	<p>Fire Safety:</p> <p>1. Fire drills will be conducted on 1st, 2nd & 3rd shifts in accordance with the requirements of the local Fire Code. Please see attachment. The Administrator or Asst. Administrator of SIC will record the rehearsals. (See Attachment)</p>		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p>	C 189			

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C 189	Continued From page 3 1. Based on observation the facility was not maintained in a safe manner by a failure to maintain the "test" feature functions of electrical emergency/safety related equipment. Finding on 05/27/2016: a. Wall Adjacent to Owner's Office - The wall mounted emergency light is missing its test button.	C 189	1. A Emergency light replaced and working. Administrator will ensure it remains operable by checking monthly	5/31/16	
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation there is an absence of exhaust ventilation in spaces required to have exhaust ventilation. Failure to exhaust air from the designated areas could effect the occupants of the facility by not removing odors, fumes or possible air borne contaminants from areas or rooms required to have exhaust ventilation.	C 199			

YEAR _____

Facility Location _____

Interior / Inspector's Initials _____

COMMON AREA INSPECTION
ST. GALE'S MANOR

Date	Walls	Ceiling	Floors	Furniture	Lights	Aquarium	Baseboard	Plants	Pictures
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COMMENTS

D=Damage R=Repair Needed
P=Painting Needed N/A=None

RP=Replacement
C=Clean Dty=Dirty

Common Area Inspection St Gales.xls

Interior Hall

BEDROOM INSPECTION
ST. GALE'S MANOR

[illegible]

COMMENTS

D=Damage R=Repair Needed
P=Painting Needed

RP=Replacement
C=Clean Dty=Dirty

Bedroom Inspection St. Gale's.xls

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C 199	Continued From page 4 Findings on 05/27/2016: a. The central exhaust is not working in the facility. b. Chemical Room - There is no exhaust fan in the in the room. c. Kitchen Mop Closet - There is no exhaust fan in the closet.	C 199	A. Central Exhaust working in facility. Monthly checks by Administration will be conducted. B. Exhaust fan will be installed in chemical rooms. Monthly checks by Administration will be conducted. C. Exhaust fan will be installed in the kitchen mop closet. Monthly checks by our Administration will be conducted.		6/6/16 7/16/16 7/16/16

Date _____
 Facility Location _____
 Interior / Inspector's Initials _____

**KITCHEN INSPECTION
ST. GALE'S MANOR**

KITCHEN AREA	CONDITION	COMMENTS
Walls		
Ceiling		
Floors		
Doors		
Windows		
Blinds		
Heat Registers		
Towel Holder		
Soap Dispenser		
Lights		
EQUIPMENT	CONDITION	COMMENTS
Stove		
Steam Tables		
Servicing Tables		
Hood Range		
Ice Maker		
Deep Fryer		
Refrigerator		
Freezer		
Sinks		
Dishwasher		
Dishes		
Food Waste Dispersal		
FOOD STORAGE RM	CONDITION	COMMENTS
Walls		
Floor		
Ceiling		
Lights		
Other		
DINING ROOM	CONDITION	COMMENTS
Walls		
Ceiling		
Floors		
Blinds		
Windows		
Servics Counter		
DR EQUIPMENT	CONDITION	COMMENTS
Tea Dispenser		
Coffee Maker		
Ice Dispenser		
Lights		
Floors		
Trash Can		
Heat Registers		
Doors		
FOOD STOR. HALL	CONDITION	COMMENTS
Wall		
Ceiling		
Floor		
Shelves		

D=Damage R=Repair Needed
 Dty=Dirty

P=Painting Needed C=Clean
 RP=Replacement

FIRE DRILL LOG

1. Date of Rehearsal: _____ Time of Rehearsal: _____

Shift: 1st - 2nd - 3rd (circle one)

Person in charge: _____

Other Staff Members Present: _____

Time for Total Evacuation: _____

Brief Description of What Was Involved: _____

2. Date of Rehearsal: _____ Time of Rehearsal: _____

Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: _____

Other Staff Members Present: _____

Time for Total Evacuation: _____

Brief Description of What Was Involved: _____
